								Application or Docket Number						
L	RATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10 kzz, 857					
CLAIMS AS FILED - PART ( (Column 1) (Column 2)								SMALL TYPE	ENTITY			R THAN		
F	TOTAL CLAIMS			10		·		RATE	FEE	OR T	RATE	ENTITY		
FOR			<del></del>	NUMBER FILED		NUMBER EXTRA		BASIC F				+		
TOTAL CHARGEABLE CLAIMS			+	/ 0 minus 20=				<del> </del>		OR		7.0.00		
INDEPENDENT CLAIMS			1/2	7 minus 3 =				XS 9=	·	OR	X\$18=	·		
MULTIPLE DEPENDENT CLAIM PI			PRESENT	11m102.2 =	Ļ			X43=	4	OR	X86=	<u> </u>		
┞							-145			OR	+290=			
• If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	3850	OR	TOTAL			
CLAIMS AS AMENDED - PART II								OTHER THAN						
		(Column 1)			(Column 2) (Column 3)			SMALI	ENTITY	OR	SMALL			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 6	Minus	: Z	20	•/		X\$ 9=		<b>V</b> OR	X\$18=			
	independent	. 1	Minus	***	3	•		X43=	1/	OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j			1	-			
,	0.9.00						Į	+145=	4	OR	+290= TOTAL			
							A	DDIT. FEE		JOR ,	ADDIT. FEE	L		
لم	/ / 00	(Column 1)	· ·	(Colum		(Column 3)	_							
AMENDMENT 8		REMAINING AFTER AMENDMENT		PREVIOUS PAID E	ER USLY	PRESENT	1	RATE	ADDI- TIONAL FEE /		RATE	ADDI- TIONAL FEE		
	Total	. 4	Minus]			= /	Ī	X\$ 9=	. /	OR	X\$18=			
	Independent	4.	Minus	127		<b>=</b> / ,	ŀ	X43=	1./	OR	X86=	/		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE D	EPENDENT (	CLAIM		ŀ		//	On I				
							L	+145=	/-	OR	+290=	•		
									L	OR ,	DOIT. FEE			
1	(Column 1) (Column 2) (Column 3) CLAIMS RIGHEST								<u></u>	_				
ENTC		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Z L	Total	•	Minus	••		2	Γ	X\$ 9=		OR	X\$18=			
	Independent		Minus			a ·		X43=			-X86=			
- 1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3:

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. OR ADDIT FEE

FORM PTO-675 (Rev. 10/03)

Pasent and Tradoment Office, U.S. DEPARTMENT OF COMMERCE .

OR

+290=

+145=